I, THOMAS RUSSELL, hereby declare as follows:

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1. My name is Thomas Russell. I am over the age of 18 and am otherwise competent to be a witness in this proceeding. I make this declaration based upon my personal knowledge except as otherwise set forth herein. I am currently the Chief Executive Officer for Daybreak Youth Services. I make this supplemental declaration in support of Plaintiff

Daybreak Youth Services' Motion for Temporary Restraining Order.

- Daybreak Youth Service holds itself out to the public as providing—and in fact does provide—alcohol and drug treatment to support recovery for teens with addiction. Every patient at the Brush Prairie facility has a Substance Use Disorder.
- Daybreak Youth Services specializes in serving youth with a dual diagnosis, who require not only SUD treatment, but also mental health care. These youth face addiction and co-occurring mental illness.
- 4. Attached as **Exhibit C** is a true and correct screen shot of the Daybreak Youth Services website's home page, as of the date of this filing.
- Attached as Exhibit D are true and correct copies of Daybreak payroll records for former employees Jennifer Walker and Cathan Tautfest, showing that the two former employees were terminated on June 21, 2018.
- 6. Attached as **Exhibit E** are true and correct copies of Separation of Employment forms maintained in Daybreak's personnel files for Ms. Walker and Mx. Tautfest, who uses gender-neutral pronouns. These personnel records showing that neither voluntarily resigned. Rather, both were terminated and were ineligible for re-hire, Ms. Walker because attendance issues made her unreliable, and Mx. Tautfest for policy violation. (Note that the forms mistakenly list the year of termination as 2017, likely a typo carried over from the date of Mx. Tautfest's hire on June 21, 2017. Mx. Tautfest was a Daybreak employee for exactly one year.)

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

DATED this 18th day of June, 2019.

Thomas Russell

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CERTIFICATE OF SERVICE

I hereby certify that on June 18, 2019, I caused to be electronically filed the foregoing Supplemental Declaration of Thomas Russell In Support of Plaintiff's Emergency Motion for Temporary Restraining Order with the Clerk of the Court using the CM/ECF system which causes parties who are registered ECF participants to be served by electronic means.

Dated this 18th day of June, 2019, at Seattle, Washington.

GARVEY SCHUBERT BARER

By <u>s/David H. Smith</u> David H. Smith

GSB:10352962.1

EXHIBIT C

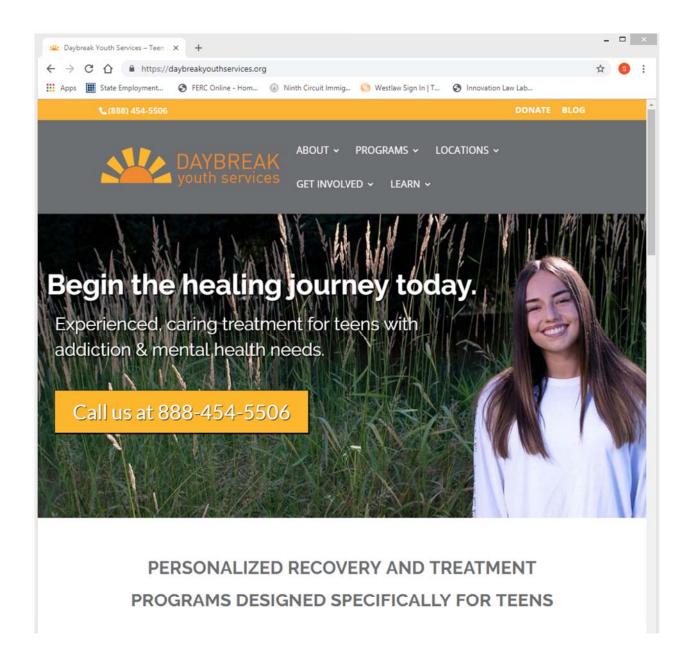


EXHIBIT D

Case 3:19 Page 7 of 11 Employee Information



Employee Information	
Name	

Jennifer Walker **JWalker** Username **Address**

Hired 09/06/2017 **Started** 09/06/2017 **Terminated** 06/21/2018

Managers

Manager 1 Christopher A. Young **Accruals** EIB (Accrued to: 01/01/2019) Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 Accrue Rate: 0/Daily Sick (Accrued to: 07/01/2018) Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 8.58 8.58 0.00 8.58 0.00 0.00 8.58 0.00 0.00 1.07 1.07 1.07 1.07 0.00 Accrue Rate: 0.025 Hrs/Pay Period

Vacation (Accrued to: 07/01/2018)

Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 33.41 33.41 0.00 0.00 0.00 33.41 0.00 4.18 4.18 0.00 0.00 0.00 4.18 0.00

Accrue Rate: 0.0595 Hrs/Pay Period

Deductions				
Begin Date End Date	\$ %	Last PR	YTD	
Vision - Pre Tax				
11/03/2017	EE	-	-	-
	ER	-	-	-
Life Insurance				
11/03/2017	EE	-	-	-
	ER	-	-	-

Tax Allowance Settings

Unemployment State From Date To Date Washington 12/31/1900 12/31/9999

Federal: Single/1

Direct Deposits

Begin Date End Date ABA# Account# Type 12/31/1900 Direct Deposit

Entire/Remainder

Credentials			
Document # Auto Policy	Active	Issued	Expires
Auto Insurance 2017 Background Checks	Υ	07/23/2017	07/23/2018
More			

Credentials - Continued		
Background check	Υ	09/06/2020
CAAR		
CG60158512	Υ	01/27/2019
CPI Training		
2017	Υ	09/01/2020
Driver's License		
Driver's License	Υ	01/22/2021
ТВ		
TB Test 2017	Υ	11/01/2018





Employee Information

Cathan Tautfest Name **CTautfest** Username

Address

Hired 06/21/2017 **Started** 06/23/2017 **Terminated** 06/21/2018

Managers

Manager 1 Angela R. Ball

Accruals

EIB (Accrued to: 01/01/2019)

Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 8.50 0.00 8.50 0.00 0.00 8.50 8.50 1.06 0.00 1.06 0.00 0.00 1.06 1.06

Accrue Rate: 0/Daily

Sick (Accrued to: 07/01/2018)

Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 41.42 21.35 10.00 11.35 0.00 0.00 31.42 0.00 5.18 3.93 2.67 1.25 1.42 0.00

Accrue Rate: 0.025 Hrs/Pay Period

Vacation (Accrued to: 07/01/2018)

Accrd Taken Balance Sch Pnd Apr Proj Acc Proj Bal 88.52 73.00 15.52 0.00 0.00 88.52 15.52 11.06 9.12 1.94 0.00 0.00 11.06 1.94

Accrue Rate: 0.0595 Hrs/Pay Period

Tax Allowance Settings

Unemployment State From Date To Date Washington 12/31/1900 12/31/9999

Federal: Single/1

Direct Deposits

Begin Date End Date Type ABA# Account# Direct Deposit

12/31/1900

Entire/Remainder

Credentials			
Document #	Active	Issued	Expires
Auto Policy			
Auto Policy	Υ	08/12/2017	02/12/2018
Background Checks			
Background Check Watch	Υ		06/21/2020
Blood Borne Pathogen			
BBP	Υ		07/01/2018
CAAR			
CG 60779152	Υ		01/25/2019
CPI Training			
2017	Υ		09/01/2019
Driver's License			
Driver's License	Υ		01/25/2023
More			

Credentials - Continued		
Food Handlers		
Food Handlers	Υ	03/26/2018
ТВ		
TB Test	Υ	07/01/2018

Seattle - PayNorthwest LLC P: 866-729-6920, F: 877-325-0731 mypayroll@paynorthwest.com

EXHIBIT E



SEPARATION OF EMPLOYMENT					
Personnel Action Notice					
Employee Name:	Jennifer Walker	Date of Notice:	6/20/20	017	
Job Title:	Skills Coach	Department:	Vancou	ver Inpatient	
Hire Date:	9/6/2017	Termination Date:	6/20/20	017	
		Benefit Termination Date:	6/20/2	017 COBRA Notice 🛛	
Reason for Separation:	☐ Voluntary Resignation with ☐ Voluntary Resignation with ☐ Layoff ☑ Termination:			tible for Re-Hire ligible for Re-Hire ents:	
Forwarding Address:					
Additional Forwarding Contact Information:					
Final Payroll Instructions:					
	Approval				
Please complete electronically and send to Associated Industries. Request will not be processed unless signatures are present. NOTE: Digital signatures are sufficient.					
Supervisor Signature:			Date:		
CEO Signature:					
Associated Industries Signa	ature:		Date:		
Comments:					
Attendance issues/Unreliab	Attendance issues/Unreliable				



SEPARATION OF EMPLOYMENT					
	Personne	l Action Notice			
Employee Name:	Cathan Tautfest	Date of Notice:	6/20/2017		
Job Title:	Skills Coach	Department:	Vancouver Inpatient		
Hire Date:	06/21/2017	Termination Date:	6/21/2017		
		Benefit Termination Date:	6/21/2017 COBRA Notice		
Reason for Separation:	☐ Voluntary Resignation with N☐ Voluntary Resignation witho☐ Layoff ☐ Termination:		☐ Eligible for Re-Hire ☐ Ineligible for Re-Hire Comments:		
Forwarding Address:					
Additional Forwarding Contact Information:					
Final Payroll Instructions:					
Approval					
Please complete electronically and send to Associated Industries. Request will not be processed unless signatures are present. NOTE: Digital signatures are sufficient.					
Supervisor Signature:			Date:		
CEO Signature:					
Associated Industries Signa	ature:		Date:		
Comments:					
Policy Violation					